

December 20, 2015

By email: Ron.Briel@nebraska.gov

Mr. Ron Briel
Program Manager
Division of Public Health, Licensure Unit
Nebraska Department of Health & Human Services
Lincoln, NE 68509

Re: Surgical Technologist Credentialing Review Application

Dear Mr. Briel:

The Association for periOperative Registered Nurses (AORN) represents the interests of more than 160,000 perioperative registered nurses by providing nursing education, practice standards, and clinical practice resources to enable optimal outcomes for patients undergoing operative and other invasive procedures. We define and advance best nursing practices for surgical patients by researching and distributing scientifically based guidelines. Evidence-based and published annually, AORN's *Guidelines for Perioperative Practice* set the gold standard for operating room procedure. As a fundamental member of the surgical team, the perioperative registered nurse can function in the role of circulator, scrub person, or first assistant at surgery.

Patient Safety in Nebraska Operating Rooms

The surgical technologists' September 3, 2015 letter of intent and October 26, 2015 credentialing review application erroneously posit that supervision of and delegation to the surgical technologist by the circulating registered nurse is not optimal for patient safety in Nebraska operating rooms. In fact, the opposite is true.

The perioperative registered nurse circulator is responsible for planning and directing patient care within the operating room, observing the surgical team from a broad perspective, and assisting the team to create and maintain a safe, comfortable environment for the patient's surgery. The RN circulator is also responsible for supervising the appropriate performance and completion of delegated technical functions under his or her direct supervision to individuals such as surgical technologists who do not hold a license. AORN policy is consistent with the Medicare Conditions of Participation for Hospitals, which are clear that surgical technologists serving in the scrub role do so under the supervision of a registered nurse. 42 C.F.R.

§482.51(a)(2) provides, “Licensed practical nurses (LPNs) and surgical technologists (operating room technicians) may serve as “scrub nurses” under the supervision of a registered nurse.” The accompanying CMS Interpretive Guidelines concerning Surgical Services in Medicare-participating hospitals provide that the circulating nurse must be an RN.

Licensure of Surgical Technologists is Unnecessary and Unwarranted

No state licenses surgical technologists. In recent years, states such as Virginia, Washington, and Colorado have reviewed and researched the need to regulate the surgical technologist profession. None found evidence to support a need for licensure, which is the strictest form of regulation. In fact, Colorado’s Department of Regulatory Agencies recommended against even a registry because surgical technologists already function under the supervision of licensed professionals in a highly regulated setting, and also finding no threat to public safety.¹ In the handful of states where there are surgical technologist registries, they are managed under the Boards of Nursing because surgical technologists’ range of functions are under the supervision of registered nurses. Further, in July 2015, the White House issued a policy framework for occupational licensing urging states to exercise caution when deciding which occupations to license and how, because of the impact on workers, consumers, and the U.S. economy as a whole.²

AORN agrees with the Nebraska Hospital Association, Nemaha Country Hospital and the Sydney Regional Medical Center that establishing a new and burdensome licensing regime for surgical technologists in the state is unnecessary and unwarranted. Both best practices and federal regulations place the surgical technologist functions squarely within the purview of the circulating registered nurse. The AST’s suggested need for physician delegation to surgical technologists in Nebraska as a reason for licensure is a red herring; there is no existing harm to surgical patients under the current RN delegation structure in Nebraska.

Sincerely,



Linda Groah, MSN RN CNOR NEA-BC FAAN
AORN CEO/Executive Director

¹ <https://drive.google.com/file/d/0B8bNvcf083ydcUdEbJJDZTVFaDg/view>.

² https://www.whitehouse.gov/sites/default/files/docs/licensing_report_final_nonembargo.pdf